
Pathways to BSN: A look at Virginia's Registered Nurse Workforce

Healthcare Workforce Data Center

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Virginia Department of Health Professions
Healthcare Workforce Data Center
Perimeter Center
9960 Mayland Drive, Suite 300
Richmond, VA 23233
804-367-2115, 804-527-4466(fax)
Website: www.dhp.virginia.gov/hwdc/

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Virginia Department of Health Professions

David E. Brown, D.C.
Director

Jaime H. Hoyle, J.D.
Chief Deputy Director

Healthcare Workforce Data Center Staff:

Elizabeth Carter, Ph.D. Director	Justin Crow, MPA Deputy Director	Laura Jackson Operations Manager	Christopher Coyle Research Assistant
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Introduction

Nurse credentialing has a unique structure among the regulated professions, and particularly among the regulated health professions. Most regulated professions have a rigid entry structure, with only one or two educational paths to entry. Physicians are a prime example. Physicians, with few exceptions, must attend a traditional medical school and complete a residency. Physician assistants (PAs) are an entirely separate profession, with their own educational and regulatory structures. Until recently there were few PA to physician educational bridges that would allow PAs to transfer their skills or work while growing in their profession. You can probably think of many other regulated professions that follow this model, both in and out of the health industry. Professions ranging from physical therapists to lawyers come to mind.

In 2008 the US Army began to offer PA to physician bridge programs, and a spattering of civilian programs followed suit.¹ While these programs offer a rare non-traditional path into medicine or osteopathy, multiple entry pathways and opportunities to advance in nursing careers characterize the nursing profession. Virginia alone regulates no fewer than four levels of nursing professions: licensed practical nurses (LPN), registered nurses (RN), clinical nurse specialists (CNS) and nurse practitioners (NP), and that does not include Certified Nursing Assistants (CNA). Bridge, online and part-time programs are available to ease transition up this career ladder within nursing.

Registered nurses, who are the mainstay of the nursing profession, can enter the profession at four educational levels: diploma, associate (ASN) baccalaureate (BSN) and master's (MSN) levels. In addition, RN to BSN programs are available to help RNs progress to BSN status and, if desired, into master-level CNS and NP professions. Accountability and standards of care are maintained with a uniquely flexible scope of practice. Before performing any activity, RNs are required to ask themselves if they have the knowledge and clinical skill to perform the activity and whether they are willing to take professional responsibility for it. If any of these are lacking, the activity is considered out of the individual nurse's scope of practice.²

In Virginia, an individual hoping to become a nurse can begin a nursing career with a GED and 120 hours of training as a CNA. It is not unreasonable for this CNA to imagine reaching the top of the nursing profession. Indeed, the data in this report demonstrates that they can and, moreover, that they do. Almost 2,000 Virginia Registered Nurses holding a master or doctoral degree began their nursing careers as an LPN or a diploma trained RN.

In addition to providing a flexible and highly adaptable workforce, this structure provides a social and economic ladder to disadvantaged groups. Historically, the nursing profession has been accessible to women and minorities. It also offers advancement opportunities to persons with low-income or low-educational backgrounds. LPNs and RNs can earn good incomes while advancing in their careers. In Virginia, the median income for LPNs is \$30,000-\$40,000, while the median income for RNs is \$50,000-\$60,000.

This paper provides a look at how RNs in Virginia advanced through their careers using data from the Healthcare Workforce Data Center Nursing Workforce Survey. It examines how the educational attainment of nurses has advanced over time. It looks at differences in educational level and advancement patterns by age and race/ethnicity. And finally, it looks at the effect different patterns of career advancement have on the economic well-being of RNs, focusing on educational debt and income.

¹ See Cornell, Stephen. Apr. 21, 2008. "Is it Time for a Bridge?". Advance Health Network for NPs&PAs. <http://nurse-practitioners-and-physician-assistants.advanceweb.com/Article/Is-It-Time-for-a-PA-to-Physician-Bridge.aspx>

² See Board of Nursing Guidance Document 90-23, "Decision-making Model for Determining RN/LPN scope of Practice", available here: http://www.dhp.virginia.gov/nursing/nursing_guidelines.htm

The 2013 Registered Nurse Workforce Survey asks respondents to provide information concerning both the initial professional degree that allowed them to practice nursing and the highest professional degree that they have obtained to date. The Healthcare Workforce Data Center has broken down these responses into five main categories: LPN/RN Diploma or Certificate, Associate Degree in Nursing (ASN), Baccalaureate Degree in Nursing (BSN), Masters Degree in Nursing, and Doctorate in Nursing. It is this information that serves as the basis for this supplementary report.

This addendum considers all RNs who were determined to be participating in Virginia's Registered Nursing Workforce as defined in the "Results in Brief" section of the main report. However, this supplementary analysis also excludes any nurses who either failed to provide answers to both their initial and highest professional degrees or provided invalid responses to these two questions (e.g., listing an initial professional education that was more advanced than their highest professional education). Data in this study is subjected to HWDC's weighting procedures. See the [HWDC Methodology & Glossary](#) and the report titled "[Virginia's Registered Nurse Workforce: 2013](#)" for details.

Of the 99,901 RNs who held a Virginia license at some point during the survey time frame, 31,166 completed surveys. From this group, 945 nurses were further excluded from the analysis because of problems with respect to their survey responses: 898 nurses failed to provide answers to both questions concerning their educational histories, while 47 nurses provided invalid responses to these two questions. Using the HWDC weighting methodology, we estimate there were 85,259 RNs's with a Virginia license in Virginia's workforce in 2013. Of these, 82,698 are covered in this report. This does not include nurses who may be working in the state without a Virginia license under the Nursing Compact.

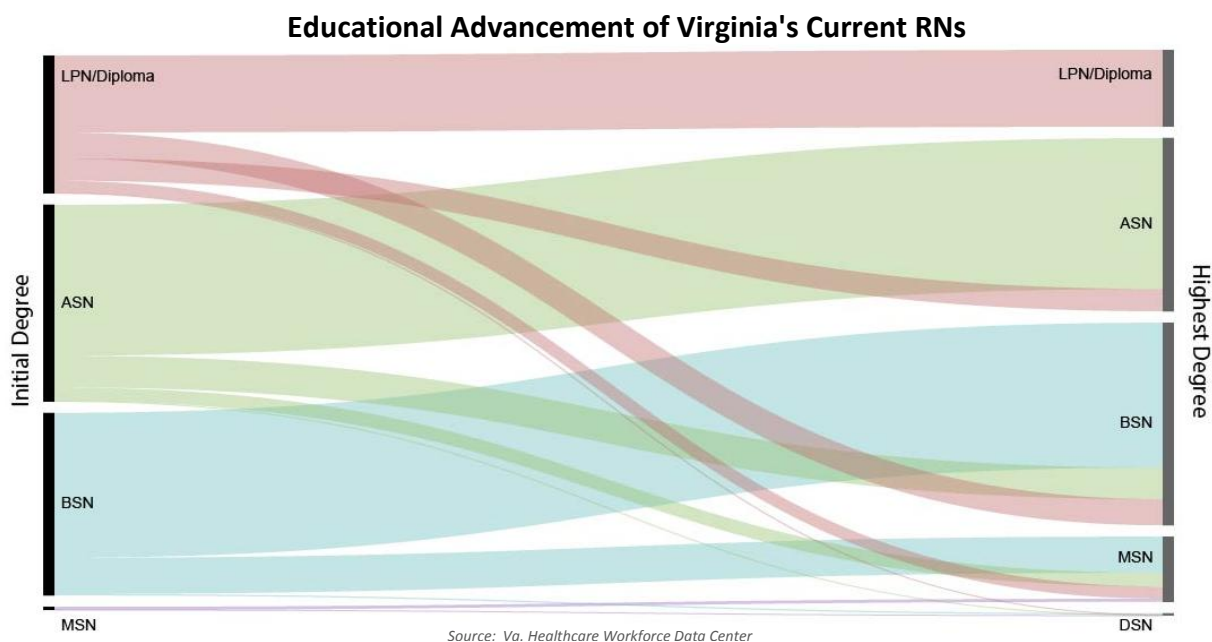
This study is a retrospective study. It examines the current population of RNs in Virginia and looks back at how they have advanced through their careers. We do not have information on nurses who may have left the nursing profession prior to the survey. This limits the types of conclusions we are able to draw. For instance, while our data demonstrates that 11% of current nurses who entered the profession with an ASN have since attained a higher degree, we cannot conclude that 11% of nurses who entered with ASN go on to attain higher degrees. We do not know how many ASNs may have switched professions, stopped working, retired, lost their license or otherwise not maintained a license in Virginia.

Career Advancement among Virginia's Registered Nurses

Educational Advancement

Nurses may enter the profession at multiple educational levels, but many of them don't stop there. As the chart and table below demonstrate, many nurses continue to progress in their careers once entering the profession. Nearly half of current RNs who entered nursing as a LPN or with a diploma³ continued their education, including nine percent who eventually obtained a masters degree or doctorate. Similarly, about a quarter of ASNs advanced to either a BSN or to advanced practice, while one in five BSNs moved on to advanced practice. One thing this data does not capture is the intervening steps nurses may have taken as they advanced their education, but it is clear that nurses use the opportunity to advance their career over multiple educational levels.

Additionally, 23% of current RNs plan to pursue additional education in the next two years, particularly ASNs (42%) and BSNs (38%). If these plans come to fruition, over 23,000 current RNs could be hitting the books over the next two years.



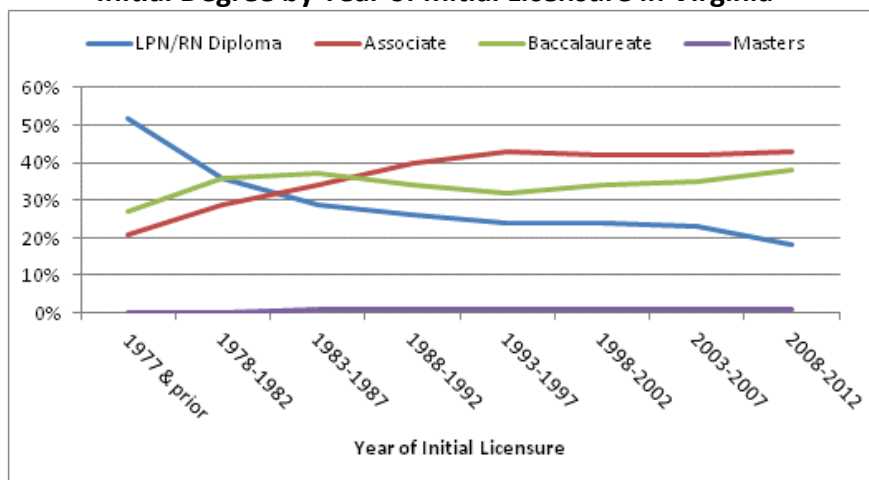
Initial Professional Degree	Highest Professional Degree									
	LPN/RN Diploma		Associate		Baccalaureate		Masters		Doctorate	
	#	%	#	%	#	%	#	%	#	%
LPN/RN Diploma	11,958	55%	3,737	17%	4,100	19%	1,904	9%	81	0%
Associate	-	-	24,592	77%	5,119	16%	2,153	7%	63	0%
Baccalaureate	-	-	-	-	22,715	80%	5,554	20%	230	1%
Masters	-	-	-	-	-	-	477	97%	15	3%

³ Since many nurses with both an RN Diploma and an LPN degree listed their LPN degree as their highest educational attainment, these two categories are combined in this study.

Historical Shift in Education

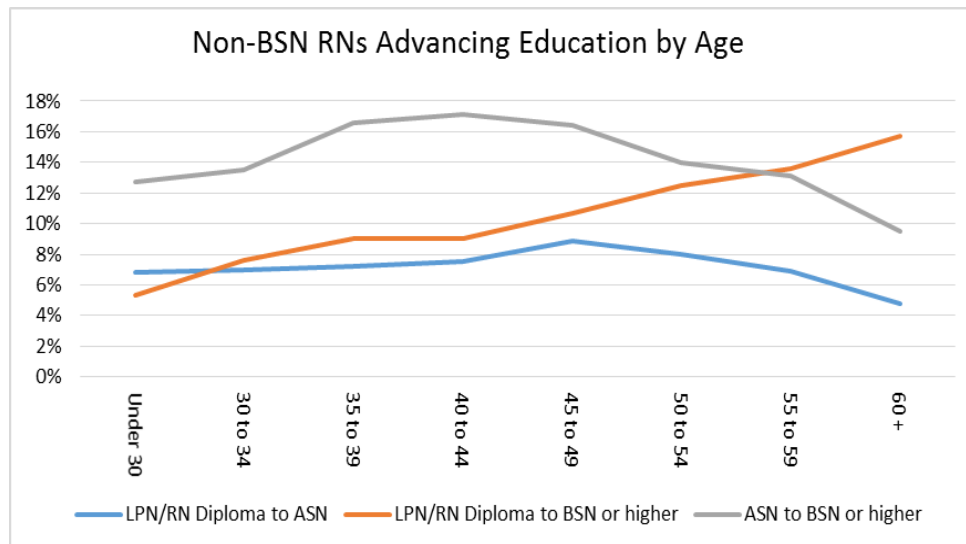
Educational advancement by current nurses has occurred as part of a historic shift in nursing education generally. Over half of current RNs who obtained their licenses prior to 1978 entered the profession as LPNs or with an RN diploma. By the turn of the century, however, fewer than a quarter began their nursing careers this way. Over the same period, the number of current RNs who initially entered as ASNs doubled from 21% to 42%, while BSNs increased from 27% to 35%. This trend in initial entry point appears to be continuing.

Initial Degree by Year of Initial Licensure in Virginia



As the educational level of new RNs has increased, current RNs have also advanced their education. This is evident when looking at educational advancement by age. Only 25% of RN's under age 30 who entered the profession without a BSN have advanced their education. However, 36% of RNs with similar background in the 45 to 49 age cohort have done so.

Non-BSN RNs Advancing Education by Age

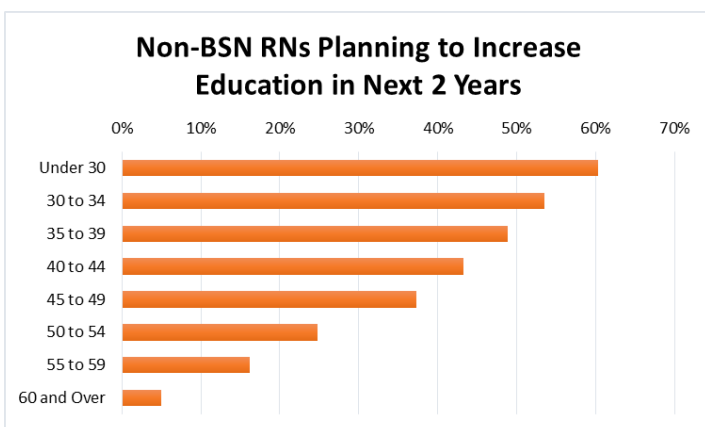


Indeed, one third of these RNs have advanced their education in every 5-year age cohort between 35 and 60, suggesting that this is an ongoing trend.

Among those RNs who have not yet obtained a BSN, many intend to increase their education—and soon. Almost a third want to pursue additional education within the next two years. This desire is strongest among younger RNs. Nevertheless, a quarter of non-BSN RNs age 50 to 54 plan to pursue additional education within the next two years.

Strikingly, RN's continue to advance their education well into the latter parts of their careers. A full 25% percent of nurses age 60 or over who entered the profession without a BSN advanced to attain a BSN, many of these continuing to attain higher degrees.

Non-BSN RNs Planning to Increase Education in Next 2 Years



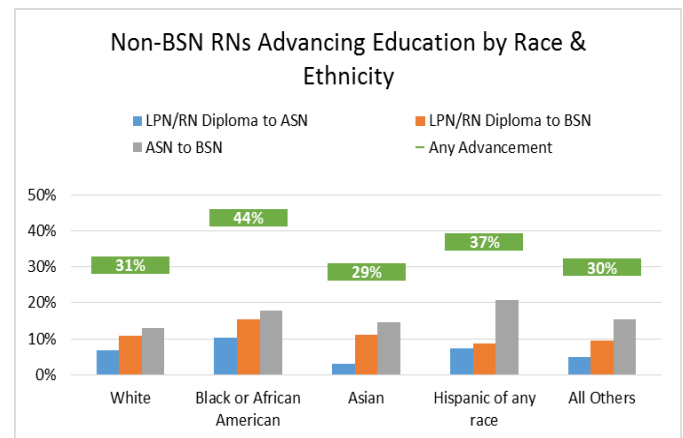
Educational Advancement & Background

BSN or Higher Degree by Race & Ethnicity						
BSN or Higher Degree	White	Black or African American	Asian	Hispanic	All Others	All RNs
Initial Degree	34%	32%	65%	38%	38%	35%
Highest Degree	49%	55%	74%	56%	53%	51%
% of BSNs w/o initial BSN	32%	41%	12%	33%	28%	32%

Educational advancement within the nursing profession may provide opportunities for persons from underserved communities or income groups. Although we lack broad information on the socio-economic status of RNs prior to entering their

nursing careers, a look at educational advancement by Race and Ethnicity and by Rural/Urban childhood may provide some insight. Among current RN's, non-Hispanic Blacks or African Americans are the most likely to have entered the profession without a BSN or higher degree, but only slightly so. However, among Black RNs with a BSN, over 41% advanced to a BSN from a non-BSN degree, more than any other race or ethnic group.

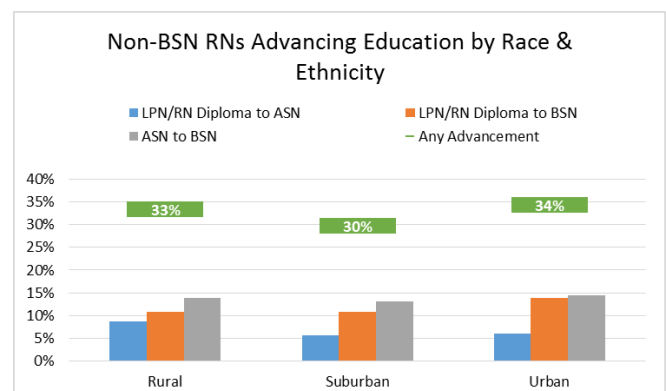
In fact, almost half of Black or African American RN's who entered the profession without a BSN advanced their education, including one-third who attained a BSN or higher degree. They were followed by Hispanic RNs, of which 37% advanced their education and 30% advanced to a BSN or higher degree. Ultimately, a higher proportion of Black and Hispanic RNs hold a BSN or higher degree than Virginia's RN population overall. Although both groups are underrepresented in the RN population, this bodes well for increasing diversity of the nursing profession. Blacks and African Americans make up 29% of Virginia's LPN workforce, compared to 19% of Virginia's population.



BSN or Higher Degree by Rural Status				
BSN or Higher Degree	Rural	Suburban	Urban	All RNs
Initial Degree	26%	42%	35%	35%
Highest Degree	44%	56%	54%	51%
% of BSNs w/o initial BSN	41%	25%	34%	32%

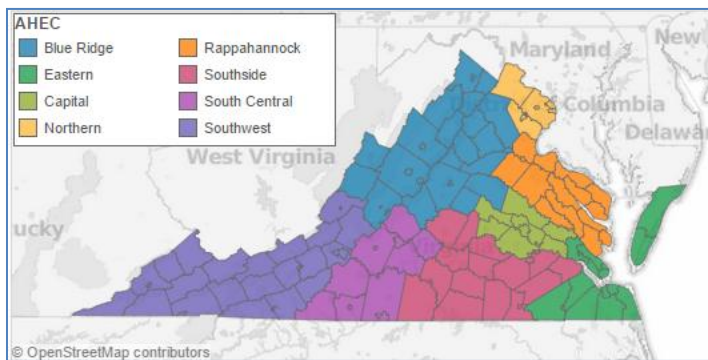
A similar phenomenon occurs among RNs from non-suburban backgrounds. RN's self-reporting being raised in either a rural or urban area tended to enter the profession without a BSN. However, a higher proportion of non-BSN RN's with a rural or urban childhood pursue additional education. Significantly higher numbers of rural and urban BSN's advanced from a non-BSN degree.

Notably, initial non-BSN RNs with an urban background pursue BSNs at high rate. So much so, this group has just about caught up with their suburban counterparts in the proportion obtaining a BSN or higher degree. These results suggest that those who may not have the same access to educational resources to begin their career can and do use nursing's educational ladder to advance their careers.



The Geography of Educational Advancement

The proportion of RN's entering the profession with a BSN or higher varies by geography. Over half of RN's whose primary work location is in the Northern Virginia Area Health Education Center region entered nursing with a BSN or higher degree, and two-thirds currently hold a BSN. At the opposite end of the spectrum, fewer than one in five RNs in Southside Virginia entered the profession with a BSN or higher degree, while only about one third currently hold a BSN. Rappahannock, South Central and Southwest Virginia also have a smaller proportion of initial and current BSNs than the state overall. In these rural areas, educational advancement is a very important pathway to BSN. Nearly half of BSNs in Southside and Southwest Virginia advanced from a non-BSN degree.

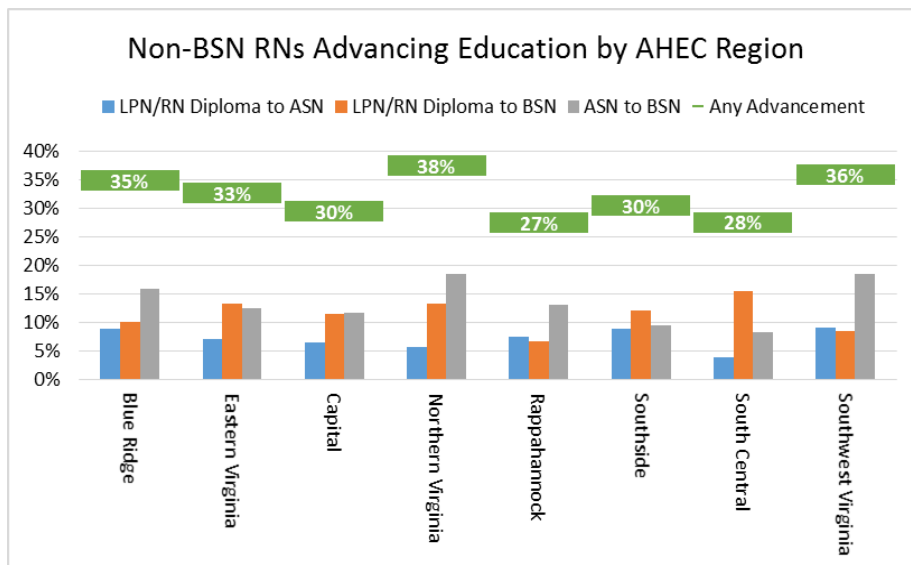


Virginia's AHEC Regions. For information see the Virginia Health Workforce Development Authority: <http://www.vhwda.org/workforce-development>.

BSN or Higher Degree by AHEC Region

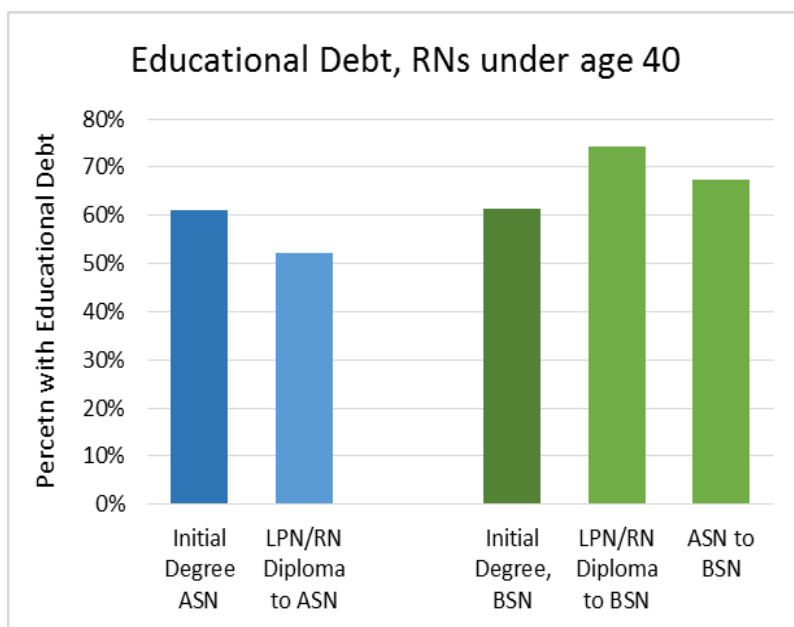
BSN or Higher Degree	Blue Ridge	Eastern Virginia	Capital	Northern Virginia	Rappahannock	Southside	South Central	Southwest Virginia	All RNs
Initial Degree	35%	32%	36%	52%	28%	18%	27%	23%	35%
Highest Degree	52%	50%	51%	67%	42%	36%	44%	43%	51%
% of BSNs w/o initial BSN	32%	35%	29%	23%	34%	50%	40%	48%	32%

Advancement by initial non-BSNs also favors Northern Virginia, where 38% of those who initially entered nursing without a BSN have advanced their education. Non-BSNs nurses may have difficulty competing in a job market saturated by BSNs, encouraging them to pursue additional education. Of those AHEC regions with the lowest proportion of initial and current BSNs, only Southwest Virginia has a higher proportion of initial non-BSN's advancing their education than the state overall. Rappahannock, Southside and South Central have the lowest proportion of initial non-BSNs advancing their education.

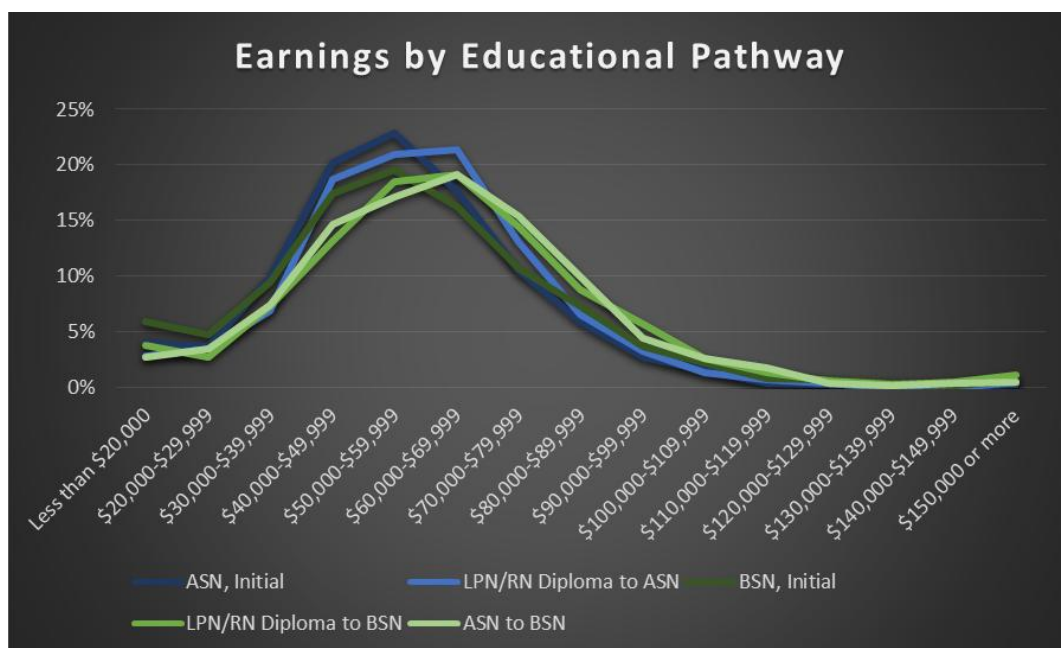


Nursing's educational ladder allows nurses to work in the nursing profession as they pursue additional education. This allows nurses to earn good incomes, potentially lowering their need to take on educational debt. This appears to be true for RNs at the ASN educational level. Slightly fewer ASNs under age 40 who entered the profession as an LPN or with an RN diploma first hold any educational debt than those who entered (and remain) ASNs. Among those who do hold debt, median debt levels are similar.

For RNs under age 40 with a BSN, the results are somewhat different. A lower proportion of these RNs who enter the profession with a BSN hold any educational debt than those who entered the professions as an LPN or non-BSN RN. This may reflect the fact that many nurses pursue additional education at a higher age, as the effect holds, but is diminished, for all RNs as well as those under age 40. Debt levels among these RNs are similar.



Regardless, the extra effort and debt may be worth it. Our data shows that ASNs and RNs who began their careers as BSNs have a median income of \$50,000-\$59,000. Those who began their careers as a non-BSN nurses have median incomes of \$60,000-\$69,000. However, differences in earnings between pathways are slight, as seen in the chart below. Educational climbers may have additional experience, reflected in the somewhat higher earnings.



Who Benefits?

In addition to the nurses themselves, employers and patients benefit from the additional knowledge and skills advanced education offers. Nurses who have climbed the nursing education ladder work in all parts of Virginia's health system. Their distribution by major establishment grouping, illustrated in the tree map below, largely matches the distribution of Registered Nurses overall. The tree map includes all nurses who entered the profession without a BSN or higher, but who advanced their education.

Distribution of Nursing Education Climbers by Major Establishment Group

